

**COMBINED DECLARATION AND
POWER OF ATTORNEY FOR
UTILITY OR DESIGN PATENT
APPLICATION (37 CFR 1.63)**

Declaration
Submitted
With Initial
Filing

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	300569
First Named Inventor	Timothy R. H. PRATT et al.
COMPLETE IF KNOWN	
Application Number	Not yet known/
Filing Date	Herewith
Group Art Unit	Not yet known
Examiner Name	Not yet known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SYSTEMS AND METHODS FOR VALIDATING PATIENT AND MEDICAL DEVICE
INFORMATION**

the specification of which (Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

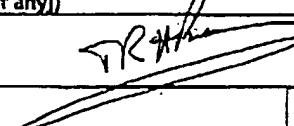
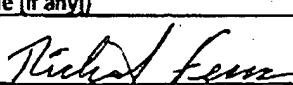
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(e) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby appoint the Faegre & Benson LLP attorneys and agents associated with Customer Number 25764 to prosecute the patent application identified above and to transact all business in the Patent and Trademark Office connected therewith, including full power of association, substitution, and revocation.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label 25764 OR <input type="checkbox"/> Correspondence address below			
Faegre & Benson LLP Name 2200 Wells Fargo Center, 90 South Seventh Street Address Minneapolis MN 55402-3901 City ZIP United States 612.766.7436 612.766.1600 Country Telephone Fax			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Timothy R. H. (first and middle [if any])		Family Name PRATT or Surname	
Inventor's Signature 		Date 26 FEB 04	
Arden Hills Residence: City		MN State	US Country
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Arden Hills City		55112 Zip	US Country
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Richard (first and middle [if any])		Family Name FEARS or Surname	
Inventor's Signature 		Date 26 Feb 04	
Moundsview Residence: City		MN State	US Country
8322 Knollwood Drive Mailing Address		US Citizenship	
Moundsville City		55112 Zip	US Country

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name SHEHADEH or Surname	
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Maple Grove City	MN State	55311 Zip	US Country
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Inventor's Signature		Date 2/26/04	
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St. Paul City	MN State	55113 Zip	US Country
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name James A. (first and middle [if any])		Family Name ESLER or Surname	
Inventor's Signature James A. Esh		Date 26 Feb, 2004	
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